

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>25</i>	<i>32</i>	<i>6/4</i>
FORMALITY REVIEW	<i>2-5</i>	<i>866</i>	<i>58-08-01</i>
RESPONSE FORMALITY REVIEW	<i>A-M</i>	<i>580</i>	<i>11-08-01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 - ..... Allowed      I ..... Interference  
 (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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*58-08-01*  
*8/8*  
*25*  
*11-08-01*